

**Application Data Sheet**

**Application Information**

Application Type:: Utility  
Subject Matter:: Utility  
CD\_ROM or CD-R?: None  
Title:: METHOD FOR QUANTITATIVELY DETERMINING  
CHOLESTEROL IN HIGH-DENSITY LIPOPROTEIN  
AND REAGENTS THEREFOR  
Attorney Docket Number:: 00005.001259.  
Suggested Drawing Figure:: 0  
Total Drawing Sheets:: 0

**Applicant Information**

Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Yuki  
Family Name:: Katayama  
City of Residence:: Mishima-shi  
Country of Residence:: Japan  
Street of mailing address:: c/o Kyowa Medex Res. Lab., KYOWA MEDEX  
600-1, Aza-Kamiyamaji, Minamiishiki,  
Nagaizumo-cho  
City of mailing address:: Sunto-gun  
State or Province of mailing address:: Shizuoka  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 411-0932  
Primary Citizenship Country:: Japan  
Status:: Full Capacity

Given Name:: Mayumi  
 Family Name:: Fujinaka  
 City of Residence:: Mishima-shi  
 Country of Residence:: Japan  
 Street of mailing address:: c/o Kyowa Medex Res. Lab., KYOWA MEDEX  
 600-1, Aza-Kamiyamaji, Minamiishiki,  
 Nagaizumo-cho  
 City of mailing address:: Sunto-gun  
 State or Province of mailing address:: Shizuoka  
 Country of mailing address:: Japan  
 Postal or Zip Code of mailing address:: 411-0932  
 Primary Citizenship Country:: Japan  
 Status:: Full Capacity  
 Given Name:: Satoshi  
 Family Name:: Moriyama  
 City of Residence:: Yokkaichi-shi  
 Country of Residence:: Japan  
 Street of mailing address:: c/o Yokkaichi Res., KYOWA HAKKO CHEM.  
 3, Daikyo-cho 2-chome  
 City of mailing address:: Yokkaichi-shi  
 State or Province of mailing address:: Mie  
 Country of mailing address:: Japan  
 Postal or Zip Code of mailing address:: 510-8502  
 Primary Citizenship Country:: Japan  
 Status:: Full Capacity  
 Given Name:: Shigeru  
 Family Name:: Murata  
 City of Residence:: Suzuka-shi  
 Country of Residence:: Japan

Street of mailing address:: c/o Yokkaichi Plant, KYOWA HAKKO CHEM.  
3, Daikyo-cho 2-chome  
City of mailing address:: Yokkaichi-shi  
State or Province of mailing address:: Mie  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 510-8502

### Correspondence Information

Correspondence Customer Number:: 5514

### Representative Information

Representative Customer Number::	05514
----------------------------------	-------

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National stage of	PCT/JP03/13259	10/16/2003

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2002-301328	10/16/2002	Yes

### Assignee Information

Assignee name:: KYOWA MEDEX CO., LTD.  
Street of mailing address:: 8-10, Harumi 1-chome  
City of mailing Address:: Chuo-ku  
State or Province of mailing address:: Tokyo  
Country of mailing address:: Japan  
Postal or Zip Code of mailing address:: 104-6004